## Caution: DRAFT FORM

This is an advance proof copy of an IRS tax form. It is subject to change and OMB approval before it is officially released. You can check the scheduled release date on our web site (www.irs.gov).

If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

_	8404		Interest Charge on DISC-Related			OMB No. 1545-0939
Form	U		Deferred Tax Liability			
Department of the Treasury Internal Revenue Service			File Form 8404 separately from your income tax return. See Where to file below.			2006
A Check applicable box to show type of taxpayer:			Name of shareholder			<b>B</b> Shareholder's identifying number
Corporation			Address (number, street, room, suite, or P.O. box number)			
☐ Individual		ual				C IC-DISC's identifying number
_	Trust or Decedent's estate					rumber
D Shareholder's tax year for which interest charge is required to be paid (see instructions)   E Name of IC-DISC						
Note: See line-by-line instructions.						
1	Taxable income of loss off tax return (actual of estimated)				2	
2	Deletted DISC Income from line 10,1 at iii, Scheddle K (Form 1720-10-DISC)				2	
3	Section 995(f)(2) adjustments to line 1 income or loss				4	
4			le lines 1, 2, and 3. If zero of less, do not lie this form			
5 Tax lia		ability on line	ty on line 4 amount			
6 Tax liability per return (actual or estimated)					6	
7	DISC-related deferred tax liability. Subtract line 6 from line 5					
8	Buod portou i bili futo fuotor				8	
9	Interest charge due. Multiply line 7 by line 8. (See Paying the interest charge below.) 9					
Sig Hei		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, ar and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of whic				id to the best of my knowledge n preparer has any knowledge.
		Signature and Title (if any)		Date		
Paid		Preparer's signature	D	s	Check if self-employed	Preparer's SSN or PTIN
	arer's Only	self-employed	Firm's name (or yours if self-employed), address, and ZIP code			)

Cat. No. 62423Z